

# 2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT # P02000053119

1. Entity Name  
KILLIAN DIVERSIFIED SERVICES, INC.



FILED

06 APR 11 AM 8:00

STATE  
TALLAHASSEE, FLORIDA

Principal Place of Business

409 WILSON AVENUE  
SATELLITE BEACH, FL 32937

Mailing Address

409 WILSON AVENUE  
SATELLITE BEACH, FL 32937

2. Principal Place of Business

311 TRINIDAD DRIVE

Suite, Apt. #, etc.

3. Mailing Address

311 TRINIDAD DRIVE

Suite, Apt. #, etc.



03252006

REIN-P

CR2E098 (11/05)

City & State

SATELLITE BEACH FL

City & State

SATELLITE BEACH FL

4. FEI Number

56-2337033

Applied For

Not Applicable

Zip

32937

Country

Zip

32937

Country

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

STUMPF, JOHN K IV  
409 WILSON AVENUE  
SATELLITE BEACH, FL 32937

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$300.00

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE PV  
NAME STUMPF, JOHN K IV  
STREET ADDRESS 409 WILSON AVENUE  
CITY-ST-ZIP SATELLITE BEACH, FL 32937 ☐ Delete

TITLE VD  
NAME DICKSON, CAROLINE I  
STREET ADDRESS 311 TRINIDAD DR.  
CITY-ST-ZIP SATELLITE BEACH, FL 32937 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PV  
NAME STUMPF JOHN K. IV  
STREET ADDRESS 311 TRINIDAD DRIVE  
CITY-ST-ZIP SATELLITE BEACH, FL 32937 ☒ Change ☐ Addition

TITLE SEC  
NAME STUMPF CAROLINE E  
STREET ADDRESS 311 TRINIDAD DR.  
CITY-ST-ZIP SATELLITE BEACH, FL 32937 ☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

3/30/06

321.795.5073